

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

RECEIVED
JUL 14 2017

ENTERED

Permit #:

Date:

Amount Paid:

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED → <input type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input checked="" type="checkbox"/> OTHER <u>Variance</u>			
Owner's Name: <u>Stephen & Tomlinson</u> <u>Andrea M Tomlinson</u>	Mailing Address: <u>723 Martin Ave</u> <u>Hudson WI, 54016</u>	City/State/Zip: <u>Hudson WI, 54016</u>	Telephone: <u>612-363-5394</u>
Address of Property: <u>69720 Island Blvd</u>	City/State/Zip: <u>Iron River WI 54847</u>	Cell Phone: <u>612-363-5394</u>	
Contractor: <u>Self</u>	Contractor Phone: <u>612-363-5394</u>	Plumber: <u>N/A</u>	Plumber Phone: <u>N/A</u>
Authorized Agent: (Person Signing Application on behalf of Owner(s)) <u>Self</u>	Agent Phone:	Agent Mailing Address (include City/State/Zip):	Written Authorization Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
PROJECT LOCATION	Legal Description: (Use Tax Statement)	Tax ID# (4-5 digits) <u>20657</u>	Recorded Deed (i.e. # assigned by Register of Deeds) Document #: _____ R- _____
_____ 1/4, _____ 1/4	Gov't Lot <u>2</u>	Lot(s) <u>55/56</u>	CSM <u>1048</u> <u>836</u>
Section <u>2</u> , Township <u>47</u> N, Range <u>8</u> W	Town of: <u>Iron River</u>	Subdivision: <u>2nd addition of Long Lake</u>	Lot Size <u>199 x 134</u> <u>unequal</u>
		Acreage <u>.56</u>	

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : <u>52</u> feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : <u>52</u> feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material <u>\$250,000</u>	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
* → <u>Special exception</u>	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type <u>Conv</u>	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement		<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> No Basement		<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input checked="" type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet		
				<input type="checkbox"/> None		

Existing Structure: (if permit being applied for is relevant to it)	Length: <u>360'</u>	Width: <u>30'</u>	Height: <u>8'15'</u>
Proposed Construction:	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(60 x 30)	1800
		with Loft	(X)	
		with a Porch	(8 x 24)	200
		with (2 nd) Porch	(X)	
		with a Deck	(8 x 24)	
<input type="checkbox"/> Commercial Use		with (2 nd) Deck	(8 x 30)	
		with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): [Signature]
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 7-14-2017

Authorized Agent: _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date _____

Address to send permit _____

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
(2) Show / Indicate: North (N) on Plot Plan
(3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
(4) Show: All Existing Structures on your Property
(5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

See attached

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	86 Feet	Setback from the Lake (ordinary high-water mark)	52 Feet
Setback from the Established Right-of-Way	53 Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	52 Feet		
Setback from the South Lot Line	120 Feet	Setback from Wetland	Feet
Setback from the West Lot Line	4.4 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	4 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	10 Feet	Setback to Well	8 Feet
Setback to Drain Field	14 Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 18-245	# of bedrooms: 2	Sanitary Date: 6-6-2018	
Permit Denied (Date):		Reason for Denial: required to be replaced per BOA condition			
Permit #:		Permit Date:			
Is Parcel a Sub-Standard Lot	<input checked="" type="checkbox"/> Yes (Deed of Record)	Mitigation Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is Parcel in Common Ownership	<input checked="" type="checkbox"/> Yes (Fused/Contiguous Lot(s))	Mitigation Attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Affidavit Attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is Structure Non-Conforming	<input checked="" type="checkbox"/> Yes side of lake				
Granted by Variance (B.O.A.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Case #: 1706 B		Case #:			
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record: See file Jenny Murphy stated at BOA Hearing that she did not verify setbacks at side inspection.		Zoning District (R-1)			
Date of Inspection: 2-14-17 (several)		Inspected by: J. Murphy Robert Schirman		Lakes Classification (2. long)	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)		Date of Re-Inspection:			
Per condition & approval of BOA.					
Signature of Inspector: [Signature]		Date of Approval: 6/22/18			
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>	
Hold For Fees: <input type="checkbox"/>					

RECEIVED
JUL 20 2017

ENTERED

MAP OF SURVEY

LOT 56 AND PARTS OF LOTS 55 AND 74 OF THE SECOND ADDITION TO LONG LAKE,
LOCATED IN GOVERNMENT LOT 2, SECTION 2, T. 47 N., R. 8 W., IN THE TOWN OF
IRON RIVER, BAYFIELD COUNTY, WISCONSIN

IMPERVIOUS SURFACE CALCULATIONS

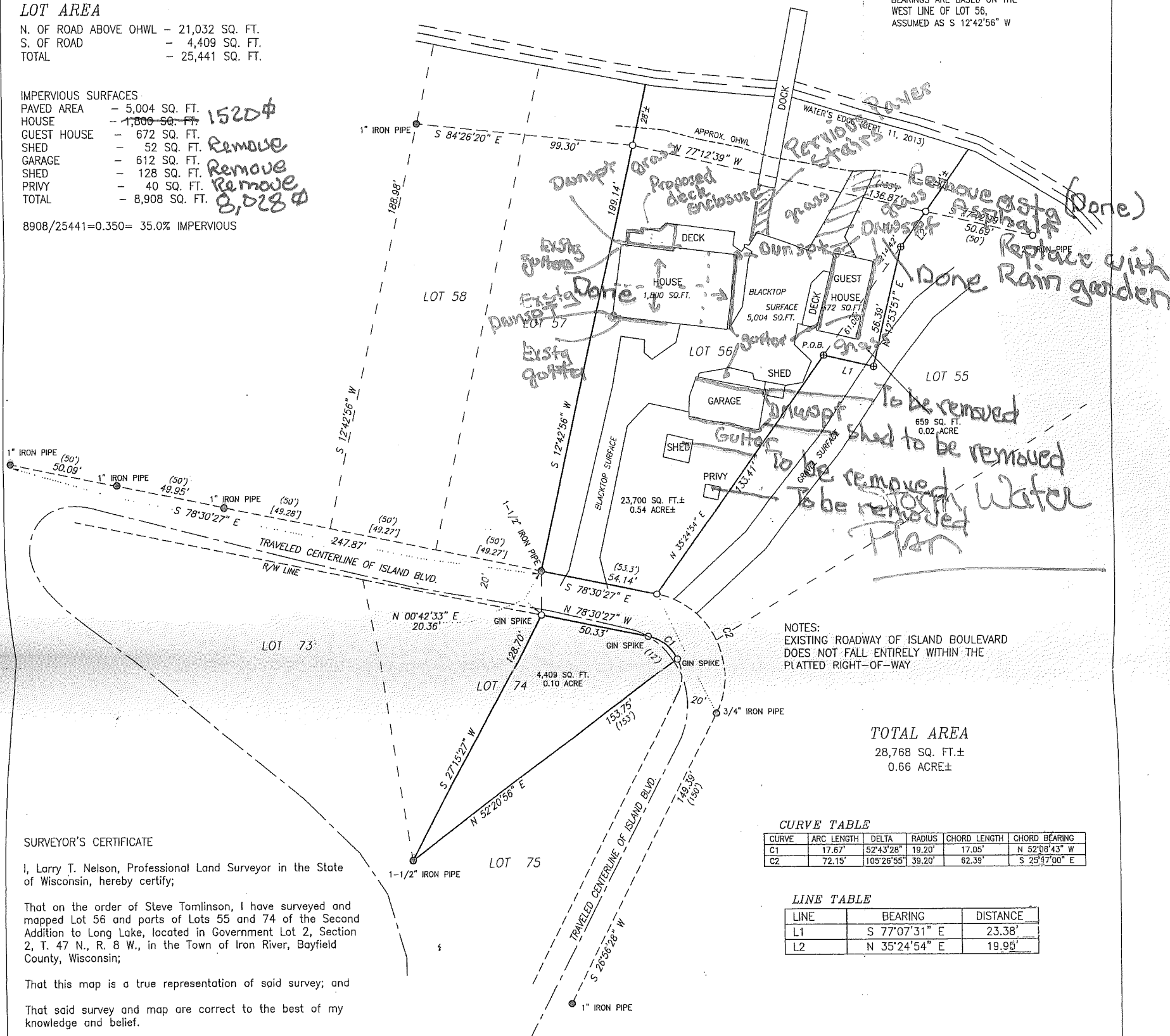
LOT AREA

N. OF ROAD ABOVE OHWL - 21,032 SQ. FT.
S. OF ROAD - 4,409 SQ. FT.
TOTAL - 25,441 SQ. FT.

IMPERVIOUS SURFACES

PAVED AREA - 5,004 SQ. FT.
HOUSE - 1,800 SQ. FT.
GUEST HOUSE - 672 SQ. FT.
SHED - 52 SQ. FT.
GARAGE - 612 SQ. FT.
SHED - 128 SQ. FT.
PRIVY - 40 SQ. FT.
TOTAL - 8,908 SQ. FT.

$8908/25441 = 0.350 = 35.0\%$ IMPERVIOUS



SURVEYOR'S CERTIFICATE

I, Larry T. Nelson, Professional Land Surveyor in the State of Wisconsin, hereby certify;

That on the order of Steve Tomlinson, I have surveyed and mapped Lot 56 and parts of Lots 55 and 74 of the Second Addition to Long Lake, located in Government Lot 2, Section 2, T. 47 N., R. 8 W., in the Town of Iron River, Bayfield County, Wisconsin;

That this map is a true representation of said survey; and

That said survey and map are correct to the best of my knowledge and belief.

Larry T. Nelson WI REG. NO. 1276

LEGEND

- FOUND MONUMENT, AS NOTED
- 1-1/4" x 18" IRON PIPE, SET IN 2013, UNLESS OTHERWISE NOTED
- ⊕ 1" x 18" IRON PIPE, SET IN OCTOBER 2014
- (50') - RECORDED DATA
- [49.27'] - CALCULATED DATA

CLIENT: TOMLINSON, STEVE

JOB NO.: N13/090

SCALE: 1 INCH = 30 FEET

NOTE: REVISED OCT. 29, 2014

(PARCEL IN LOT 55)

NB. 390 PG. 143

DRAFTED BY: P. NELSON

FILE:N/DA/T47NR8W/SEC2/

ACAD/N13090_REVISED_2014

PSDATA/N04079

NELSON
SURVEYING
INCORPORATED

SURVEYING YOUR NECK OF THE WOODS SINCE 1954

101 W. MAIN STREET
SUITE 100
ASHLAND, WISCONSIN 54806
(715) 682-2692
FAX: (715) 682-5100

MAP NO. 4265 A ©

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – X w/affidavit (Doc# 2017R-570702)

SANITARY – X (18-34S)

SIGN –

SPECIAL –

CONDITIONAL –

BOA – X (# 17-06B-Spcl Exceptions & Variance) & (#17-07B-Spcl Exception)

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-06B & 17-07B** Issued To: **Stephen & Andrea Tomlinson**

Location: $\frac{1}{4}$ of $\frac{1}{4}$ Section **2** Township **47** N. Range **8** W. Town of **Iron River**

Gov't Lot Lot **56 & part of Lot 55** Subdivision **Second Addition to Long Lake** CSM#
(metes and bounds description in V. 1138 P. 256 Register of Deeds Office)

(#17-06B-Spcl Exception & Variance): Allows the existing (shoreland) 1-story residence (30' x 48') with deck #1 (9' x 8'); deck #2 (12' x 24'); deck #3 (20' x 8'); deck (9' x 6'); porch (14' x 14') at an overall 42.5' x 54.5'=2,690 sq. ft.) at a height of 15' to be a **distance of 2 feet from West property line instead of 10' as required; and allows a distance of 34 feet from the ordinary high-water mark of Long Lake instead of 75' as required**

(#17-07B-Spcl Exception): Allows existing 1-story garage (17' x 31' at a 12' height) to be a **distance of 8 feet from East property line instead of 10' as required.**

(Disclaimer): The Planning and Zoning Department does not authorize the beginning of any construction or land use; you must first obtain land use application(s)/permit card(s) from the Planning and Zoning Department. You (the property owner) shall fulfill the conditions placed by the Board of Adjustment; your recorded affidavit; sanitary (if applicable) and/or any additional requirements placed by this Department. The Planning and Zoning Department requires verification/proof that all conditions have been met.

Any future expansions or development would require additional permitting.

Condition(s): (1) *The property must be inspected and found to be in compliance with the Mitigation Plan submitted to the Bayfield County Planning and Zoning department by the Tomlinson's on May 25, 2016;* (2) *A new septic sanitary system plan must be approved by the Bayfield County Planning and Zoning Department before any new construction can begin on the property. (The Tomlinson's are encouraged to consider future capacity requirements before submitting such a plan);* (3) *If, after receiving all required approvals and permits, the Tomlinson's do construct an addition to the garage, no further additions, buildings or structures of any kind may be added to the property.*

NOTE: Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found

to have been misrepresented, erroneous, or incomplete.
This permit may be void or revoked if any performance conditions are not
completed or if any prohibitory conditions are violated.

Board of Adjustment

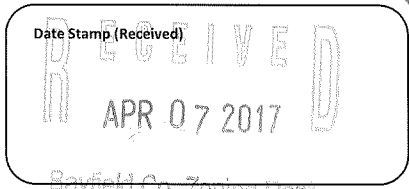
Authorized Issuing Official

June 26, 2018

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Permit #: 18-0216
Date: 6-26-18
Amount Paid: 75. - 4-21-17
Sh. Cal. 100.00 7-21-17
Refund:
dak

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

TYPE OF PERMIT REQUESTED → ☐ LAND USE ☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE ☒ B.O.A. ☐ OTHER

Owner's Name: Stephen R. Tomlinson
Address of Property: 6972D Island Blvd
Contractor: OWNER
Authorized Agent: (Person Signing Application on behalf of Owner(s))
Mailing Address: 723 Martin Hudson WI 54016
City/State/Zip: Iron River WI 54847
Contractor Phone:
Plumber:
Agent Phone:
Agent Mailing Address (include City/State/Zip):
Telephone:
Cell Phone: 612-363 5394
Plumber Phone:
Written Authorization Attached ☐ Yes ☒ No

PROJECT LOCATION: Legal Description: (Use Tax Statement) PIN: (23 digits) 04- 20657
Recorded Document: (i.e. Property Ownership) Volume 1048 Page(s) 836
1/4, 1/4 Gov't Lot Lot(s) CSM Vol & Page Lot(s) No. Block(s) No. Subdivision: Second addition to Long Lake
Section 2, Township 47 N, Range 8 W Town of: Iron River Lot Size Acreage 0.45

☐ Shoreland → ☒ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue → Distance Structure is from Shoreline : 112 feet
☒ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue → Distance Structure is from Shoreline : 131 feet
☐ Non-Shoreland

Is Property in Floodplain Zone? ☐ Yes ☒ No
Are Wetlands Present? ☐ Yes ☒ No

Value at Time of Completion * include donated time & material	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$10,000.00	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: Septic	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement		<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> No Basement		<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____	<input type="checkbox"/> Foundation			<input type="checkbox"/> Compost Toilet	
	<input type="checkbox"/> _____	<input type="checkbox"/> _____			<input type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it) Length: 31 Width: 17 Height: 9
Proposed Construction: Length: 20' Width: 18' Height: 9'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2 nd) Porch	(X)	
		with a Deck	(X)	
<input type="checkbox"/> Commercial Use		with (2 nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building (specify) _____	(X)	
	<input checked="" type="checkbox"/>	Accessory Building Addition/Alteration (specify) Addition to existing garage	(18 X 20)	340
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Stephen R. Tomlinson Andrea M. Tomlinson Date: 4.5.2017
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ Date: _____
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 723 Martin Ave Hudson WI 54016
Attach Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

000903

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N)** on Plot Plan
- (3) Show Location of (*): **(*) Driveway and (*) Frontage Road** (Name Frontage Road)
- (4) Show: **All Existing Structures** on your Property
- (5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
- (6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
- (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**

See Attached

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement		Description	Measurement
Setback from the Centerline of Platted Road	83 60 Feet		Setback from the Lake (ordinary high-water mark)	110 Feet
Setback from the Established Right-of-Way	52 80 Feet		Setback from the River, Stream, Creek	11 Feet
			Setback from the Bank or Bluff	11 Feet
Setback from the North Lot Line	100 Feet			
Setback from the South Lot Line	72 Feet		Setback from Wetland	1 Feet
Setback from the West Lot Line	47 Feet		Setback from 20% Slope Area	11 Feet
Setback from the East Lot Line	10 10 Feet		Elevation of Floodplain	11 Feet
Setback to Septic Tank or Holding Tank	50 Feet		Setback to Well	40 Feet
Setback to Drain Field	60 Feet			
Setback to Privy (Portable, Composting)	N/A Feet			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

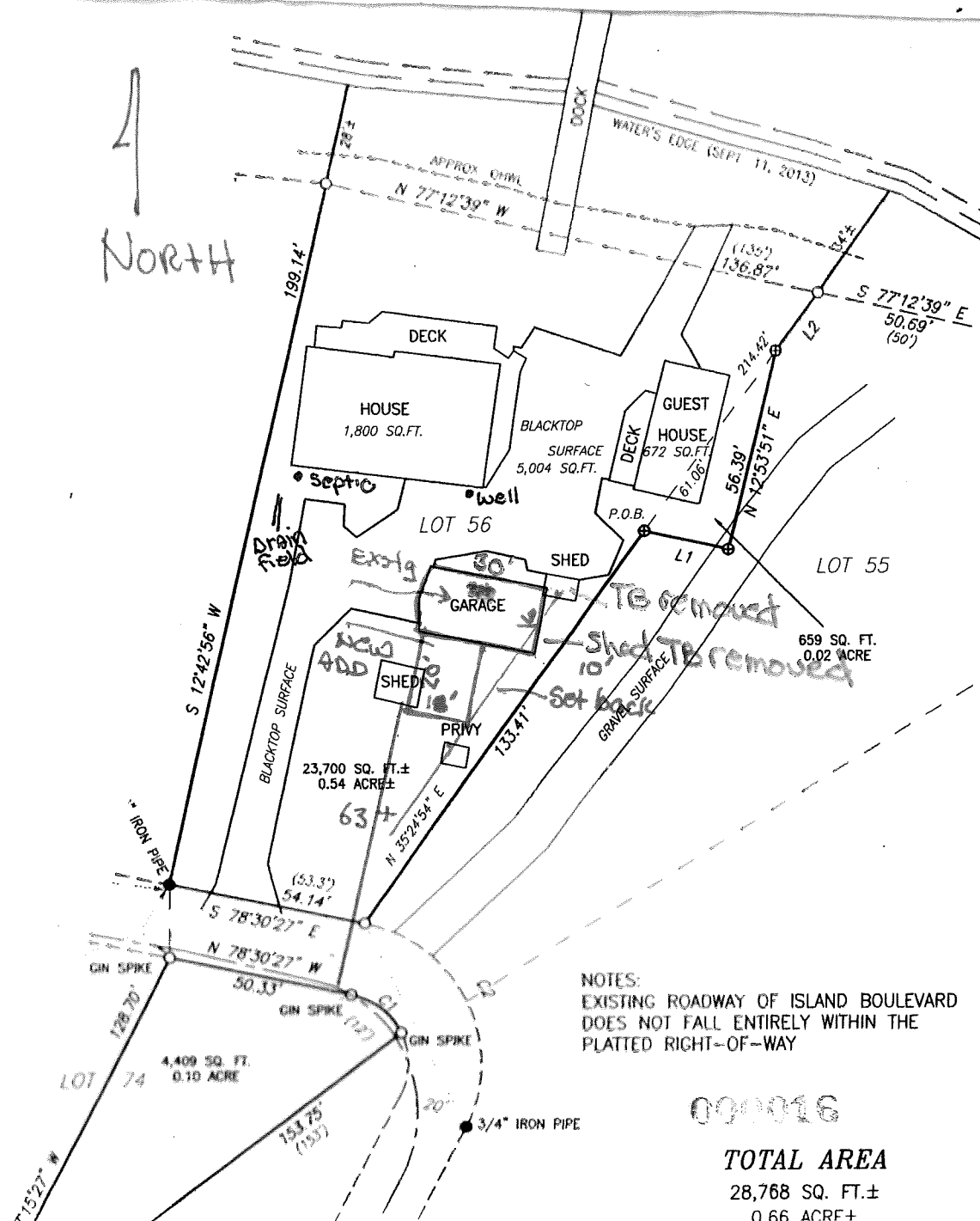
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 18-345	# of bedrooms: 2	Sanitary Date: 6-6-18
Permit Denied (Date):		Reason for Denial: NEW SANITARY REQUIRED BDA.		
Permit #: 180016		Permit Date: 6-26-18 PER BDA.		
Is Parcel a Sub-Standard Lot	<input checked="" type="checkbox"/> Yes (Deed of Record)	<input type="checkbox"/> No	Mitigation Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is Parcel in Common Ownership	<input checked="" type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input type="checkbox"/> No	Mitigation Attached	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Affidavit Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Case #: 17-073		Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record: NOT AN STORMWATER MANAGEMENT		Zoning District (R1)		
Date of Inspection: 7-14-17 (SERIAL)		Inspected by: JCMURPHY		Lakes Classification (2-Long)
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)		Date of Re-Inspection: 6/7/18		
ADDITION MUST BE LOCATED AT LEAST 10 FT. FROM PROPERTY LINE. SPECIAL EXCEPTION APPROVED PER BDA CONDITIONS. BDA CONDITIONS MUST BE SATISFIED PRIOR TO THE START OF CONSTRUCTION ON THE ADDITION.				
Signature of Inspector: [Signature]		Date of Approval: 11-22-17		
Hold For Sanitary: <input type="checkbox"/>	Hold For BDA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

North



Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – X
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –

BOA – (#17-07B-Spcl Exception) allowed existing 1-story garage (17' x 31' at a 12' height) to be a distance of 8 feet from East property line instead of 10' as required.

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **18-0216** Issued To: **Stephen & Andrea Tomlinson**

Location: $\frac{1}{4}$ of $\frac{1}{4}$ Section **2** Township **47** N. Range **8** W. Town of **Iron River**

Gov't Lot Lot **56** Block Subdivision **Second Addition to Long Lake** CSM#

For: **Residential Accessory Structure Add/Alt:** [1- Story; Garage Addition (20' x 18' x 9' height) = 340 sq. ft.]

Condition(s): Addition must be located at least 10 feet from property line. Special exception approved per BOA conditions.
BOA conditions must be satisfied prior to the start of construction on the addition.

No Further Development allowed on this property.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Robert Schierman

Authorized Issuing Official

June 26, 2018

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED
JUN 19 2018

ENTERED

Permit #:	18-0221
Date:	6-28-18
Amount Paid:	\$3,000 6-27-18
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Dept.

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: Bretting Manufacturing, Inc	Mailing Address: 3401 Lake Park Rd Ashland, WI 54806	City/State/Zip: Ashland, WI 54806	Telephone: 715-682-5231
Address of Property: 68150 Front St	City/State/Zip: Iron River, WI 54847		Cell Phone:
Contractor: ARVIE MACKAY CON. INC.	Contractor Phone: 715-682-9128	Plumber: Brown Plumbing & Heating	Plumber Phone: 715-209-0029
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Paul Bretting	Agent Phone:	Agent Mailing Address (include City/State/Zip): Bretting's Ashland	Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT LOCATION 1/4, 1/4	Legal Description: (Use Tax Statement)	Tax ID# 19149	Recorded Document: (Showing Ownership) 2011R 537589
Gov't Lot	Lot(s) 1	CSM 17	Vol & Page V3 P331
CSM Doc #	Lot(s) No.	Block(s) No.	Subdivision:
Section 8	Township 47 N	Range 8 W	Town of: Iron River
Lot Size	Acreage 3.785		

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms in structure	What Type of Sewer/Sanitary System is on the property?	Type of Water on property
\$1200,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> Municipal/City	<input checked="" type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> _____			<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____		<input type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
			<input type="checkbox"/> _____		<input type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it)	Length: 222	Width: 60	Height: 12'
Proposed Construction:	Length: 200	Width: 150	Height: 16'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
	<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	200 X 150	30,000
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
<input type="checkbox"/> Residential Use JUN 28 2018		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
		with (2nd) Deck	(X)	
<input checked="" type="checkbox"/> Secretarial Staff <input checked="" type="checkbox"/> Commercial Use		with Attached Garage	(X)	
	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Mobile Home (manufactured date) _____	(X)	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building (specify) _____	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____	(X)	
	<input type="checkbox"/>	Special Use: (explain) _____	(X)	
	<input type="checkbox"/>	Conditional Use: (explain) _____	(X)	
	<input type="checkbox"/>	Other: (explain) _____	(X)	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

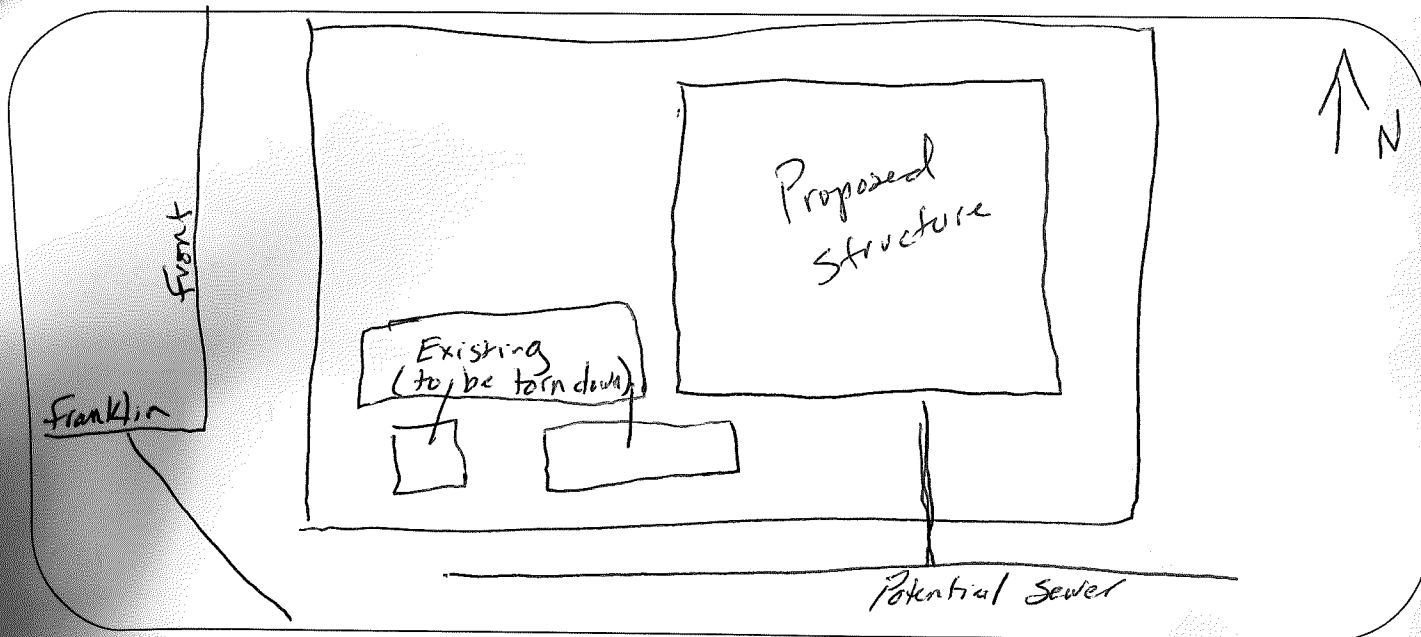
Owner(s): Paul Bretting
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

68150 Front St, Iron River, WI 54847

APPLICANT: PLEASE COMPLETE PLOT PLAN ON REVERSE

- Location of: **Proposed Construction**
 Show / Indicate: **North (N) on Plot Plan**
 Show Location of (*): **(*) Driveway and (*) Frontage Road (Name Frontage Road)**
 (4) Show: **All Existing Structures on your Property**
 (5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
 (6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
 (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	330 Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	300 Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	20 Feet		
Setback from the South Lot Line	123 Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	290 Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	63 Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	NA Feet	Setback to Well	NA Feet
Setback to Drain Field	NA Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 18-0001		Permit Date: 6-28-18		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Proposed Building Site Delineated	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No only drawn on Plot Plan	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Inspection Record: Proposed building was not staked but I have talked to contractor. However, the north property line will be close to proposed structure. 5 feet is required set-back.		Zoning District (I) Lakes Classification (—)		
Date of Inspection: 6/27/18		Inspected by: Todd Norwood		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.) must meet and maintain all set-backs. Must meet 5 foot set-back at north property line. Structure must be connected to Iron River Sanitary District.				
Signature of Inspector: Todd Norwood				Date of Approval: 6/28/18
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

Village, State or Federal
Also Be Required

USE - X
ARY - City

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **18-0221** Issued To: **CGB Acquisitions LLC**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **8** Township **47** N. Range **8** W. Town of **Iron River**

Gov't Lot Lot **1** Block Subdivision CSM# **17**

For: **Commercial Principal Structure: [1- Story; Machine Shop (200' x 150') = 30,000 sq. ft.]**

(Disclaimer): Any future expansions or development would require additional permitting.

**Condition(s): Must meet and maintain all setbacks. Must meet 5-foot setback at North property line.
Structure must be connected to Iron River Sanitary District.**

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

June 28, 2018

Date